

La Crosse Medical Health Science Consortium

Amish Culture
for Clinical Providers



Special thanks to...

- Gundersen Health System
- La Crosse Medical Health Science Consortium (LMHSC)
- LMHSC Cultural Competency Committee

for their assistance in developing this cultural competency module

Disclaimer

Caution on Stereotyping

- The material in this program is generalized and is not intended to perpetuate stereotypes of diverse individuals or groups of people
- Cultural traits may vary based on individual preference and level of acculturation – someone may have physical attributes of a specific heritage, but it does not mean he/she practices the traits of that culture
- Bottom line: Never Assume, Always Ask!
 - ▶ Never assume that every member of any culture holds the same beliefs and ideals
 - ▶ Use this background information to ask culturally sensitive, informed questions

Traditional Medical Practices: Overview

- In the Amish culture, a healthy person:
 - Has a good appetite
 - Looks physically well
 - Can do rigorous physical labor
- Illness = the inability to perform daily chores
 - Physical and mental illness accepted equally

Traditional Medical Practices: Who Administers Care?

- The Amish utilize a variety of healthcare providers:
 - Chiropractor
 - Massage Therapist
 - Reflexologist
 - Lay Midwife
 - Herbalist
 - “Pow-wow” (thought to be used rarely)
- A “Pow-wow” is a traditional folk practitioner
 - Uses words, charms, or physical manipulation for healing
 - Pow-wowing is learned orally from a person of opposite gender

Traditional Medical Practices: Treatment/Procedures

- Typical “cure-alls”:
 - Oils, salves, minerals, herbs, compounds, lotion, poultices, and health foods
- 5 week formula (sometimes used in last 5 weeks of pregnancy)
 - Red Raspberry Leaves (relieves nausea and pain)
 - Butcher’s Broom Root (diuretic, anti-inflammatory, promotes circulation)
 - Black Cohosh Root (reduce pain and cramping)
 - Dong Quai Root (anti-inflammatory, diuretic, sedative)
 - Squaw Vine Root (speeds delivery, encourages contractions)

Interaction 1 of 3

- Amish view illness as the inability to perform chores or other daily work.
 - True
 - False

**Caution on
Stereotyping**

Interaction 1 of 3 (Answer)

- Amish view illness as the inability to perform chores or other daily work.
 - True
 - False

Traditional Medical Practices: Pain Management

- Amish traditionally have a high pain tolerance
 - Could be because the need to finish chores is viewed as more important than slight discomfort
- As a result, they may wait for a very long time before going to a Western doctor
 - Usually last straw
 - Often very sick once they reach hospital/clinic

Traditional Medical Practices: Views on Western Medicine

- Western medicine is usually valued and accepted & respected by Amish
 - Often used when nothing else will work
- Usually supportive of what needs to be done to restore health
- May assume that providers do not want to hear about folk remedies
 - Always ask about home remedies for possible drug interactions

Biological Variation: Disease Trends

- Amish tend to be generally healthy
 - Get adequate exercise
 - Do not usually use alcohol, tobacco, or other drugs
- Preventative medicine is not always embraced
 - Communicable diseases (measles, whooping cough) may occur due to lack of immunization
- Limited gene pool may result in an increase of hereditary diseases:
 - Hemophilia, cystic fibrosis, dwarfism, neurological disorders, Down syndrome

Interaction 2 of 3

- Amish tend to have a very high pain tolerance.
 - True
 - False

Caution on
Stereotyping

Interaction 2 of 3 (Answer)

- Amish tend to have a very high pain tolerance.
 - True
 - False

Preferred End of Life Care: Death and Dying

- Death is usually accepted as a natural occurrence
- Father/husband will probably be the main decision maker
 - A bishop or other community leader may have input as well
- Expect large numbers of visiting family
- Care is traditionally provided by family members

Preferred End of Life Care: Death and Dying

- The family may want to change the clothes of the dying person
- Prolongation of life may be seen as “against God’s will”
- Autopsy is generally not favored, but may be accepted if the necessity is explained
- Organ donation usually not preferred
- Some families may wish to take the body home to personally prepare it for burial

Preferred End of Life Care: Grief and Loss

- The Amish tend to be stoic
 - May dislike public displays of emotion
 - Death (even sudden or death of child) could be met with calm acceptance

Interaction 3 of 3

- For decisions, look to the male head of the household.
 - True
 - False

Caution on
Stereotyping

Interaction 3 of 3 (Answer)

- For decisions, look to the male head of the household.
 - True
 - False

Question 1 of 4: Identify the correct choice to complete each of the bulleted statements below:

- A traditional Amish folk practitioner is called a:
- Among Amish, Western Medicine is usually:
- Death is commonly viewed as:

Choices:

- a. Valued and accepted
- b. Pow-wow
- c. A part of life

**Caution on
Stereotyping**



**Question 1 of 4: Identify the correct choice to complete each of the bulleted statements below:
(Answers)**

- A traditional Amish folk practitioner is called a **Pow-wow**.
- Among Amish, Western Medicine is usually **valued and accepted**.
- Death is commonly viewed as a **part of life**.

Choices:

- a. Valued and accepted
- b. Pow-wow
- c. A part of life

Question 2 of 4

- Which of these is a common home remedy for illness?

(Select all that apply)

- Herbs
- Salves
- Poultices

**Caution on
Stereotyping**

Question 2 of 4 (Answer)

- Which of these is a common home remedy for illness?

(Select all that apply)

- Herbs
- Salves
- Poultices

Question 3 of 4

- Amish tend to be generally healthy due to their daily lifestyle.
 - True
 - False

**Caution on
Stereotyping**

Question 3 of 4 (Answer)

- Amish tend to be generally healthy due to their daily lifestyle.
 - True
 - False

Question 4 of 4

- Expect loud, public, emotional responses to death within the Amish community.
 - True
 - False

Caution on
Stereotyping

Question 4 of 4 (Answer)

- Expect loud, public, emotional responses to death within the Amish community.
 - True
 - False

La Crosse Medical Health Science Consortium

We hope you had a good experience using this module.
If you have any comments or ideas you would like to
share about this module, or future modules, please
contact the LMHSC Cultural Competence Committee at:

hscinformation@westernnc.edu

Thank you!



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For additional cultural competency resources,
please visit the link below:

[http://www.lacrosseconsortium.org/content/c/cultural
_competency_learning_modules](http://www.lacrosseconsortium.org/content/c/cultural_competency_learning_modules)

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References:

- Andrews, M.M., & Boyle, J.S. (1998). *Transcultural Concepts in Nursing Care*. Philadelphia: Lippincott.
- Banks, M. J., & Benchot, R.J. (2001). Unique aspects of nursing care for Amish children. *The American Journal of Maternal/Child Nursing*, 26(4), 192-196.
- Blair, R.B., & Hurst, C.E. (1997). Amish health care. *The Journal of Multicultural Nursing and Health*, 3(2), 38-60.
- Julia, M.C. (1996). *Multicultural Awareness in the Health Care Professions*. Boston: Allyn and Bacon.
- Lemon, B.S. (2002). Amish health care beliefs and practices in an obstetrical setting. *The Journal of Multicultural Nursing and Health*, 8(3). 72-77.
- Palmer, C.V. (1992). The health beliefs and practices of an old order Amish family. *Journal of the American Academy of Nurse Practitioners*, 4(3), 117-122.
- Wegner, A.F.Z. (1995). Cultural context, health and health care decision making. *Journal of Transcultural Nursing*, 7(1), 3-14.